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SECURITIES AND EXCHANGE COMMISSION Section

Washington, D.C. 20549

JUN 192012

FORM 11-K

Washington DC

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(Mar	k One)
	ANNUAL REPORT PURSUANT TO SECTION 15(d) OF THE SECURITIES EXCHANGE ACT OF 1934
	For the fiscal year ended December 31, 2011
	OR
	TRANSITION REPORT PURSUANT TO SECTION 15(d) OF THE SECURITIES EXCHANGE ACT OF 1934
	For the transition period from to
Com	mission file number: 000-51800
A.	Full title of the plan and the address of the plan, if different from that of the issuer named below:
	United Community Bank 401(k) Profit Sharing Plan
B.	Name of issuer of the securities held pursuant to the plan and the address of its principal executive office:
	United Community Bancorp 92 Walnut Street
	Lawrenceburg, Indiana 47025

REQUIRED INFORMATION

- Items 1-3. The United Community Bank 401(k) Profit Sharing Plan (the "Plan") is subject to the Employee Retirement Income Security Act of 1974, as amended ("ERISA"), and files plan financial statements and schedules prepared in accordance with the financial reporting requirements of ERISA. The Plan files such financial statements and schedules in lieu of the financial statements required by these Items, as permitted by Item 4.
- Item 4. Pursuant to Section 103 (c) of ERISA the Plan has elected to utilize the "80 to 120 Participant Rule" and file as a small plan. As such, no audit is required of the Plan financial statements. A copy of the Plan's summary annual report and Schedule I to the Form 5500 Annual Report are attached hereto.

Section I Form 5500 and Summary Annual Report

SCHEDULE I (Form 5500)

Department of the Treasury Internal Revenue Service

Department of Labor

Financial Information—Small Plan

This schedule is required to be filed under section 104 of the Employee Retirement Income Security Act of 1974 (ERISA), and section 6058(a) of the internal Revenue Code (the Code). OMB No. 1210-0110

2011

Employee Benefits Security Administration Pension Benefit Guaranty Corporation	▶ File as an attachment to Form 5500.					This Form is Open to Public Inspection				
For calendar plan year 2011 or fiscal pla	an year beginning	01/01/2011		and ending	12/	31/2011				
A Name of plan			В	Three-digit plan number (PN)	>	002				
UNITED COMMUNITY BANK 40)1(K) PROFIT SH	ARING PLAN								
C Plan sponsor's name as shown on line 2a of Form 5500			D	Employer Identification Number (EIN)						
INTERD COMMINITY RANK				35-0593216						

Complete Schedule I if the plan covered fewer than 100 participants as of the beginning of the plan year. You may also complete Schedule I if you are filing as a small plan under the 80-120 participant rule (see instructions). Complete Schedule H if reporting as a large plan or DFE.

Small Plan Financial Information

Report below the current value of assets and liabilities, income, expenses, transfers and changes in net assets during the plan year. Combine the value of plan assets held in more than one trust. Do not enter the value of the portion of an insurance contract that guarantees during this plan year to pay a specific dollar benefit at a future date. Include all income and expenses of the plan including any trust(s) or separately maintained fund(s) and any payments/receipts to/from insurance carriers. Round off amounts to the nearest dollar.

1	Plan Assets and Liabilities:		(a) Beginning of Year	(b) End of Year
а	Total plan assets	1a	4,198,380	4,121,623
b	Total plan liabilities	1b	0	0
С	Net plan assets (subtract line 1b from line 1a),	10	4,198,380	4,121,623
2	Income, Expenses, and Transfers for this Plan Year:		(a) Amount	(b) Total
а	Contributions received or receivable:			
	(1) Employers	28(1)	126,376	
	(2) Participants	2a(2)	262,009	
	(3) Others (including rollovers)	2a(3)		
b	Noncash contributions	2b		
C	Other Income	2c	(260,063)	
d	Total income (add lines 2a(1), 2a(2), 2a(3), 2b, and 2c)	2d		128,322
е	Benefits paid (including direct rollovers)	2e	203,839	
f	Corrective distributions (see instructions)	2f		
g	Certain deemed distributions of participant loans (see instructions)	2g		
h	Administrative service providers (salaries, fees, and commissions)	1	1,240	
1	Other expenses	21		
j	Total expenses (add lines 2e, 2f, 2g, 2h, and 2i)	2)		205,079
k	Net income (loss) (subtract line 2) from line 2d)	2k		(76,757)
1	Transfers to (from) the plan (see instructions)	21		

Specific Assets: If the plan held assets at anytime during the plan year in any of the following categories, check "Yes" and enter the current value of any assets remaining in the plan as of the end of the plan year. Allocate the value of the plan's interest in a commingled trust containing the assets of more than one plan on a lineby-line basis unless the trust meets one of the specific exceptions described in the instructions.

				No	Amount
а	Partnership/joint venture interests	3a		Х	
b	Employer real property	3b		Х	
C	Real estate (other than employer real property)	3c		х	
d	Employer securities	3d	х		802,346
e	Participant loans	30	Х		159,011

		ſ	Yes	No	A	mount	***************************************
3f	Loans (other than to participants)	31		x		· · · · · · · · · · · · · · · · · · ·	
g	Tangible personal property	3g		х	AMON COLOR OF COMMENT OF THE COLOR		
a	Tangibio perconal property				<u></u>	······································	***************************************
D.	art II Compliance Questions				**************************************		
4	During the plan year:		Yes	No		Amount	
а	Was there a failure to transmit to the plan any participant contributions within the time period described in 29 CFR 2510.3-102? Continue to answer "Yes" for any prior year failures until fully corrected. (See instructions and DOL's Voluntary Flduciary Correction Program.)	4a		X			
b	Were any loans by the plan or fixed income obligations due the plan in default as of the close of plan year or classified during the year as uncollectible? Disregard participant loans secured by the participant's account balance.	4b		x			
С	Were any leases to which the plan was a party in default or classified during the year as uncollectible?	4c		x			**************************************
d	Were there any nonexempt transactions with any party-in-interest? (Do not include transactions reported on line 4a.)	4d		х			
е	Was the plan covered by a fidelity bond?	40	x			3,	750,000
f	Did the plan have a loss, whether or not reimbursed by the plan's fidelity bond, that was caused by fraud or dishonesty?	4f		х			
g	Did the plan hold any assets whose current value was neither readily determinable on an established market nor set by an independent third party appraiser?	49		х			
h	Did the plan receive any noncash contributions whose value was neither readily determinable on an established market nor set by an independent third party appraiser?	4h		x		مرسد مرب والمراجع وا	
i	Did the plan at any time hold 20% or more of its assets in any single security, debt, mortgage, parcel of real estate, or partnership/joint venture interest?	41		х			
j	Were all the plan assets either distributed to participants or beneficiaries, transferred to another plan, or brought under the control of the PBGC?	41		х		anacas varrerm rmm	
k	Are you ctaiming a waiver of the annual examination and report of an independent qualified public accountant (IQPA) under 29 CFR 2520.104-46? If "No," attach an IQPA's report or 2520.104-50 statement. (See instructions on waiver eligibility and conditions.)	4k	x				
ı	Has the plan failed to provide any benefit when due under the plan?	41		X	ļ		
	If this is an Individual account plan, was there a blackout period? (See Instructions and 29 CFR 2520.101-3.)	4m		х			
n	If 4m was answered "Yes," check the "Yes" box if you either provided the required notice or one of the exceptions to providing the notice applied under 29 CFR 2520.101-3	4n		х			
5a	Has a resolution to terminate the plan been adopted during the plan year or any prior plan year? If "Yes," enter the amount of any plan assets that reverted to the employer this year	Y	es ⊠I	No .	Amount:		
5b	If, during this plan year, any assets or liabilities were transferred from this plan to another plan(s), ide transferred. (See instructions.)	entify	the pla	n(s) to	which assets o	r liabilltis	
	5b(1) Name of plan(s)		5b(2) EIN(s) 5b(3) PI			5b(3) PN(s)	
		_		,			
, <u>,</u>							

SUMMARY ANNUAL REPORT

For UNITED COMMUNITY BANK 401(K) PROFIT SHARING PLAN

This is a summary of the annual report for UNITED COMMUNITY BANK 401(K) PROFIT SHARING PLAN, EIN 35-0593216, Plan No. 002, for period January 01, 2011 through December 31, 2011. The annual report has been filed with the Employee Benefits Security Administration, U.S. Department of Labor, as required under the Employee Retirement Income Security Act of 1974 (ERISA).

Basic Financial Statement

Benefits under the plan are provided by a trust fund. Plan expenses were \$205,079. These expenses included \$1,240 in administrative expenses, and \$203,839 in benefits paid to participants and beneficiaries. A total of 115 persons were participants in or beneficiaries of the plan at the end of the plan year, although not all of these persons had yet earned the right to receive benefits.

The value of plan assets, after subtracting liabilities of the plan, was \$4,121,623 as of December 31, 2011, compared to \$4,198,380 as of January 01, 2011. During the plan year the plan experienced a decrease in its net assets of \$76,757. This decrease includes unrealized appreciation and depreciation in the value of plan assets; that is, the difference between the value of the plan's assets at the end of the year and the value of the assets at the beginning of the year or the cost of assets acquired during the year. The plan had total income of \$128,322, including employer contributions of \$126,376, employee contributions of \$262,009, and earnings from investments of (\$260,063).

Your Rights To Additional Information

You have the right to receive a copy of the full annual report, or any part thereof, on request. The items listed below are included in that report:

• financial information

To obtain a copy of the full annual report, or any part thereof, write or call the office of UNITED COMMUNITY BANK at 92 WALNUT STREET P.O. BOX 4070, LAWRENCEBURG, IN 47025, or by telephone at (812) 537-4822. The charge to cover copying costs will be \$0.00 for the full annual report, or \$0.00 per page for any part thereof.

You also have the right to receive from the plan administrator, on request and at no charge, a statement of the assets and liabilities of the plan and accompanying notes, or a statement of income and expenses of the plan and accompanying notes, or both. If you request a copy of the full annual report from the plan administrator, these two statements and accompanying notes will be included as part of that report. The charge to cover copying costs given above does not include a charge for the copying of these portions of the report because these portions are furnished without charge.

You also have the legally protected right to examine the annual report at the main office of the plan (UNITED COMMUNITY BANK, 92 WALNUT STREET P.O. BOX 4070, LAWRENCEBURG, IN 47025) and at the U.S. Department of Labor in Washington, D.C., or to obtain a copy from the U.S. Department of Labor upon payment of copying costs. Requests to the Department should be addressed to: Public Disclosure Room, Room N1513, Employee Benefits Security Administration, U.S. Department of Labor, 200 Constitution Avenue, N.W., Washington, D.C. 20210.

SIGNATURES

Pursuant to the requirements of the Securities Exchange Act of 1934, the trustees (or other persons who administer the employee benefit plan) have duly caused this Annual Report to be signed on the Plan's behalf by the undersigned hereunto duly authorized.

United Community Bank 401(k) Profit Sharing Plan

Plan Administrator E. G. McLaughlin